

**MULTIPLE DEPENDENT CLAIM .
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/570599

FILING DATE

MAR 06 2006

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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48			/	/		
49			/	/		
50			/	/		
TOTAL IND.		↓	1	↓		↓
TOTAL DEP.		←	21	←		←
TOTAL CLAIMS			22			

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		←	2	←		←
TOTAL CLAIMS			4			